INTERFACILITY TRANSPORT TASK FORCE

MEETING SEPTEMBER 27, 2005 LITTLETON, NH

Members present:

Dave Dubey, Berlin EMS/ EMS Coord. Board; Clay Odell, NHBEMS; Kim Thayer, Littleton Reg. Hosp.; Alisa Butler, DHHS-Rural Health; Chandra Englebert, Weeks Medical Center, Jonathan Dubey, Berlin EMS, Will Riley, representing Tinker Kiesman, North Conway Ambulance Service, Jean McGovern, Littleton Regional Hospital

Members excused:

Kurt Lucas, Littleton Regional Hospital, Jeanne Erickson, Speare Memorial Hospital;

Members absent:

Robin Gagnon, Woodsville Ambulance; Scott Howe, Weeks Medical Center; Deanna Howard, DHMC, Nick Mercuri, LRGH/Trauma Medical Review Comm.; Adam Smith, Ross Ambulance; Michelle Willette, Stewarts Ambulance; David Santamaria, Stewarts Ambulance

• Dave Dubey requested that information about the Task Force's work be distributed to a wider audience. Most people are not aware of the progress that has been made by the Task Force and it would be useful to get the message out. Action to be taken on this suggestion is to improve the location of the notes from the meetings on the Bureau of EMS website, send a summary to all participants of the March 2005 Interfacility Transport Summit. In addition Clay sent a letter to the hospital CEO's several months ago regarding the activities of the Task Force, and he will send out another one.

It was suggested to conduct a followup meeting of the March 2005 Interfacility Transport Summit. The audience would be somewhat smaller but with a representation of all disciplines involved in the topic. The target date for this meeting would be early 2006.

- The major effort of today's Task Force meeting was to review actions taken on the work plans from the previous meeting and to make revisions as necessary.
- Eliminate decision-making based on ability to pay. Pursue a process that is blinded to insurance information for ambulance service acceptance or refusal of a transfer request.

At the August meeting there was a discussion about how to proceed with getting a consensus of the applicable EMS services leaders about blinding the process of ambulance services accepting or declining to do interfacility transfers based on the patient's ability to pay. The group consensus was to take a two-pronged approach. The first was to have a meeting of all the applicable EMS unit leaders to discuss this issue as well as several others. This approach has the ability to achieve a consensus of leadership following discussion of the issue. The second

approach is to meet with the leadership of EMS units that are perceived as non-compliant, as well as the involved hospitals.

The group reconsidered this issue and decided to table the idea of coordinating a meeting of the service leaders. Instead the group strongly recommended that a subcommittee be charged with meeting with the parties that have been identified during discussion, and gathering more information. Alisa Butler and Clay Odell will proceed with that task and report at the October meeting.

2. Draft a generic decision tree to match patient needs with ambulance resources. This will address issues of clinicians complicating the acquisition of an ambulance because they request levels of care that are higher than the patient really needs.

The task force members again reviewed the draft documents that Weeks Medical Center had composed. Members of the Task Force were requested to share the draft document with the appropriate parties back home and be prepared to discuss the feedback at the October meeting.

3. Investigate the sharing of crew resources between services for episodes where a full crew is not available but an appropriate EMS provider from another service is ready and willing to serve as a crew member.

The method considered by the group to be most likely to succeed is each service expanding their per-diem pool to include EMS providers from other services that will fill a need infrequently. There needs to be more input from service leaders on this topic. Clay will explore the best way to facilitate that.

 Next meeting: The next meeting is scheduled for October 25, 2005 at 10:00 at Littleton Regional Hospital. The task force appreciates Littleton Regional Hospital's continuing support for this committee's meetings.